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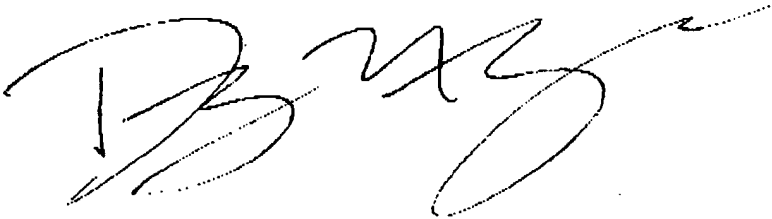
August 25, 2008

Number of Pages (including this cover sheet): 3

Attached are the two power of attorneys, one for each named inventor, to change application 10-035890.

Please call if you have any questions.

Thank you for your assistance in this matter.



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PTO/SB/81 (07-08)
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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10 035890
	Filing Date	12/31/2001
	First Named Inventor	DOUGLAS A. NAGAN
	Title	
	Art Unit	3691
	Examiner Name	HAMILTON, LAURA M
	Attorney Docket Number	DUNHAM

I hereby revoke all previous powers of attorney given in the above-identified application.

- ☐ A Power of Attorney is submitted herewith.
- OR**
- ☐ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.
- OR**
- ☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

- ☐ The address associated with the above-mentioned Customer Number.

OR

- ☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	DOUGLAS A. NAGAN				
Address	32 Lobb Lane				
City	DEEP RIVER	State	CT	Zip	06417
Country	USA				
Telephone	860-526-4743	Email	DOUG.NAGAN@GMAIL.COM		

I am the:

- ☒ Applicant/Inventor.

OR

- ☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	[Signature]		Date	8/20/08
Name	DOUGLAS A. NAGAN		Telephone	860 526 4743
Title and Company				

NOTE Signatures of all the inventors or assignees of record of the entire interest in their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

- ☒ Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting this completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FILLED OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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